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PTO/SB/21 (12-97)

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# TRANSMITTAL FORM

*(to be used for all correspondence after initial filing)*

Total No. of Pages in this Submission: 9

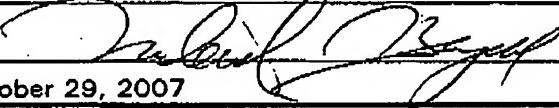
Application Number	10/523,454	
Filing Date	with an effective filing date of July 28, 2003	
First Named Inventor	Augustinus BADER	
Group Art Unit	1651	
Examiner Name	Allison M. FORD	Fax: (871) 273-8300
Attorney Docket Number	HEUBEN P03AUS (Formerly LORWER P33AUS)	

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee attached - Check \$ <input checked="" type="checkbox"/> Response ..... [8] <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request (In Duplicate) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Stmt <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Part/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition (DELETED - no longer useful) <input type="checkbox"/> To Convert a Provisional Petition <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below):
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## REMARKS

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Michael J. BUJOLD DAVIS BUJOLD & DANIELS, P.L.L.C.	Reg. No. 32,018 CUSTOMER NO. 020210
Signature		
Date	October 29, 2007	

## CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the USPTO on October 29, 2007.

Type or printed name	Michael J. BUJOLD
Signature	
Date: October 29, 2007 (nay)	

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**Response Under 37 CFR 1.116  
Expedited Procedure  
Examining Group: 1651**

10/29/07

**PATENT APPLICATION**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of	:	Augustinus BADER
Serial no.	:	10/523,454
Filed	:	with an effective filing date of July 28, 2003
For	:	METHOD AND DEVICE FOR CULTURING
Group Art Unit	:	CELLS
Examiner	:	1651
Docket	:	Allison M. FORD
		HEUBEN P03AUS (Formerly LORWER P33AUS)

**MAIL STOP AF**  
The Commissioner for Patents  
U.S. Patent & Trademark Office  
P. O. Box 1450  
Alexandria, VA 22313-1450

**RESPONSE**

Dear Sir:

**[XXX] NO FEES ARE PAYABLE WITH RESPECT TO THIS RESPONSE.**

In response to the official action mailed September 20, 2007, please enter the following before reconsideration of this application.

**In the Claims:**

Please cancel apparatus claims 108 - 112 , without prejudice or disclaimer of the subject matter therein, and amend claims 87, 96 and 120 as follows in which the claim additions are shown by underlining and/or the claim deletions are shown by strikeout or brackets. Please enter the amended claims into the record of this case.